

Nebraska Department of Education
Office of Nutrition

SFSP Claim Entry Hints & Tips (6-11-2020)

Click on "Claims" in white letters at the top. Then click on "Claim – SFSP" under "Item".

Summer Food Service Program

NEBRASKA
DEPARTMENT OF EDUCATION

Applications | **Claims** | Compliance | Reports | Security | Search | Programs | Year | Help | Log Out

Claims > Program Year: 2019 - 2020

Item	Description
Claim - SFSP	Summer Food Service Program Claims
Claim Rates	View current claim rates
Payment Summary	Summary of payments made to this Sponsor

Select the Month for which you want to submit a claim. The months eligible for reimbursement will appear in blue text.

Claim Month	Adj Number	Claim Status	Date Received	Date Processed	Earned Amount
Oct 2019					\$0.00
Nov 2019					\$0.00
Dec 2019					\$0.00
Jan 2020					\$0.00
Feb 2020					\$0.00
Mar 2020					\$0.00
Apr 2020					\$0.00
May 2020					\$0.00
Jun 2020					\$0.00
Jul 2020					\$0.00
Aug 2020					\$0.00
Sep 2020					\$0.00
Year to Date Totals					\$0.00



Select "Add" next to the site for which you want to submit a claim.

Actions	Site #	Site Name	1st Meal Amount	2nd Meal Amount	Previous Amount	Errors	Status
Add	0001	Ashland Park/Robbins	\$0.00	\$0.00	\$0.00		

1. Enter the total number of meals served – there will be text boxes next to each of that site's approved meal services. In this example, the site was approved for breakfast only.
2. Calculate Average Daily Attendance by dividing the total number of all meals served in the month by the number serving days.
3. Enter total number of meals served in First Meals Served.

General Information

	Total Number of Days Food Served	Average Daily Attendance
1. Breakfast	1 0	0 2
2. AM Snack	0	0
3. Lunch	0	0
4. PM Snack	0	0
5. Supper	0	0

Self-Prep and/or Vended-Rural Meals Served to Children

Report only meals meeting the requirement on the agreement.

	First Meals Served	Second Meals Served
6. Breakfast	3 0	0
7. AM Snack	0	0
8. Lunch	0	0
9. PM Snack	0	0
10. Supper	0	0

Created By: kPartch 4/1/2020 8:51:04 PM Modified By: kPartch 4/1/2020 8:51:04 PM

Save

Cancel



Month/Year Claimed	Adjustment Number	Date Received	Date Accepted	Date Processed	Reason Code
Mar 2020	0				

The Site Claim has been saved.

< Edit Finish

Repeat adding site claims for each site operated during the claim month. When all site claims have been entered, click the red "Continue" button at the bottom of the list of sites.

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Continue

Upload Claim Data

You will be taken to a claim summary page where you will mark the certification box at the bottom of the page and then click the red "Submit for Payment" button.

Claim Reimbursement Total

0.00

Certification



By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise." U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

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Submit For Payment



The CNP system will generate the screen below with a unique confirmation number; this confirmation will also be emailed to the address that displays at the bottom of the picture below. The **confirmation number** means the claim is accepted and will be processed for payment.

Month/Year Claimed	Adjustment Number	Date Received	Date Accepted	Date Processed	Reason Code
Apr 2020	0	06/11/2020	06/11/2020		Original

Confirmation Number: **FKFGGY**

Thank you for your **April 2020** Claim Submission.

If you need to view any of your sites' claim submissions, choose "View" next to the claim for the chosen claim month.

Claim Month: April 2020

Claim Items	Adj Number	Date Received	Date Accepted	Date Processed	Earned Amount	Status
View Modify Summary	0	06/11/2020	06/11/2020		\$2,581.03	Accepted
Total Earned					\$2,581.03	

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The system will show your list of sites. Choose which you'd like to view. Choosing "View" will not take your claim out of Accepted status. Viewing your claim will NOT affect your claim's payment.

Actions	Site #	Site Name	1st Meal Amount	2nd Meal Amount	Previous Amount	Errors	Status
View	0001	Ashland Park/Robbins	\$795.62	\$0.00	\$0.00		Approved
View	0002	Bancroft	\$1,132.65	\$0.00	\$0.00		Approved
	0003	Benson West	\$0.00	\$0.00	\$0.00		Not Eligible



If you wish to modify a claim that has been submitted for payment, click “Modify” next to the claim for the chosen claim month.

Claim Month: April 2020

Claim Items	Adj Number	Date Received	Date Accepted	Date Processed	Earned Amount	Status
View Modify Summary	0	06/11/2020	06/11/2020		\$2,581.03	Accepted
Total Earned					\$2,581.03	

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The system will show your list of sites. Choose which you'd like to modify. Choosing “Modify” **will take your claim out of Accepted status** and this will affect your claim's payment.

Month/Year Claimed	Adjustment Number	Date Received	Date Accepted	Date Processed	Reason Code
Apr 2020	0	06/11/2020	06/11/2020		Original

Actions	Site #	Site Name	1st Meal Amount	2nd Meal Amount	Previous Amount	Errors	Status
View Modify	0001	Ashland Park/Robbins	\$795.62	\$0.00	\$0.00		Approved
View Modify	0002	Bancroft	\$1,132.65	\$0.00	\$0.00		Approved
	0003	Benson West	\$0.00	\$0.00	\$0.00		Not Eligible

After you've made changes and clicked “Save” at the bottom of the site claim entry page, navigating back to the site claim list will show the claim status changed from Approved to Validated,

Month/Year Claimed	Adjustment Number	Date Received	Date Accepted	Date Processed	Reason Code
Apr 2020	0	06/11/2020			Original

Actions	Site #	Site Name	1st Meal Amount	2nd Meal Amount	Previous Amount	Errors	Status
View Modify	0001	Ashland Park/Robbins	\$795.62	\$0.00	\$0.00		Validated
View Modify	0002	Bancroft	\$1,132.65	\$0.00	\$0.00		Approved



You must complete the certification process again by clicking "Continue" at the bottom of the site claim page.

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Upload Claim Data

Then, mark the certification box and then the red "Submit for Payment" button.

Claim Reimbursement Total

0.00

Certification



By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise." U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

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A new confirmation number will appear and will be sent via email.

Month/Year Claimed	Adjustment Number	Date Received	Date Accepted	Date Processed	Reason Code
Apr 2020	0	06/11/2020	06/11/2020		Original

Confirmation Number: **EKAC0C**

Thank you for your **April 2020** Claim Submission.

